

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: HARMONY OF WISCONSIN RAPIDS II (0009381)

Address: 2230 JAMES COURT, WISCONSIN RAPIDS, WI 54494

License Status: REGULAR

Licensed/Certified/Registered 01/25/2002

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History

Survey ID: 0095390 **End Date:** 07/20/2005 **Type:** STANDARD **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0095304 **End Date:** 07/19/2005 **Type:** OTHER **Purpose:** COMPLAINT/SELF REPORT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009439 Served 08/04/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.11(3)(a)	RESPONSIBILITIES	06/15/2006	Yes
83.21(4)(g)	FAIR TREATMENT	06/15/2006	Yes

Survey ID: 0092428 **End Date:** 03/09/2004 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009256 Served 05/03/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.32(2)(a)1	PHYSICAL HEALTH	07/20/2005	Yes
83.33(3)(a)1	PRACTITIONER'S WRITTEN ORDER FOR MEDS	07/20/2005	Yes
83.33(3)(b)1	CONTROL	07/20/2005	Yes

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Survey ID: 0092119 End Date: 01/13/2004 Type: OTHER Purpose: COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009242 Served 03/18/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
13.05(3)(a)	ENTITY ALLEGATION REPORTING REQUIREMENTS	06/30/2005	Yes
83.17(1)	RESIDENT FUNDS-AUTHORIZATION	06/30/2005	Yes
83.19(1)(d)	PHYSICAL OR MENTAL CONDITION	06/30/2005	Yes
83.19(1)(e)1	ABUSE OR MISAPPROPRIATION OF PROPERTY	06/30/2005	Yes
83.21(4)(l)	CLOTHING AND POSSESSIONS	06/30/2005	Yes
83.21(4)(p)	PROMPT AND ADEQUATE TREATMENT	06/30/2005	Yes
83.33(3)(e)6	MEDICATION ERRORS AND ADVERSE REACTIONS	06/30/2005	Yes

Survey ID: 0090873 End Date: 07/10/2003 Type: STANDARD Purpose: SURVEY/COMPLAINT/SELF REPORT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10005244 Served 10/29/2003

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.06(1)(a)3	NEEDS NOT COMPATIBLE WITH CLIENT GROUP	01/13/2004	Yes
83.15(1)(a)	STAFFING PATTERNS	01/13/2004	Yes
83.18(1)(d)	RESIDENT RECORD SHALL INCLUDE	01/13/2004	Yes
83.20(2)(b)1	INITIATED BY CBRF-30 DAY NOTICE	01/13/2004	Yes
83.21(4)(o)	MEDICATIONS	01/13/2004	Yes
83.21(4)(w)	SAFE ENVIRONMENT	01/13/2004	Yes
83.32(2)(a)5	HARMFUL BEHAVIOR PATTERNS	01/13/2004	Yes
83.42(3)(d)	STAFF TRAINED IN EMERGENCY PLAN	01/13/2004	Yes

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Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Enforcement History

Date: 08/03/2005 **SOD #10009439** **Appealed: No**

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
COMPLY WITH REQUIREMENT
PROVIDE TRAINING
FORFEITURE---83.11(3)(a)
FORFEITURE---83.21(4)(g)
FORFEITURE---Accruing Forfeiture

Date: 04/29/2004 **SOD #10009256** **Appealed: No**

Sanctions

FORFEITURE---83.32(2)(a)1 Physical Health

Date: 03/15/2004 **SOD #10009242** **Appealed: Yes** **Decision: WITHDRAWN APPEAL (NO STIPULATIO**

Sanctions

COMPLY WITH REQUIREMENT
FORFEITURE---83.19(1)(d)
FORFEITURE---83.19(1)(e)1
FORFEITURE---83.21(4)(p)
FORFEITURE---83.33(3)(e)6

Date: 10/24/2003 **SOD #10005244** **Appealed: No**

Sanctions

OTHER SANCTION
FORFEITURE---83.06(1)(a)3
FORFEITURE---83.15(1)(a)
FORFEITURE---83.21(4)(o)
FORFEITURE---83.21(4)(w)
FORFEITURE---83.32(2)(a)5

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Provider Inspection Summary

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Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Complaint History

Date Complaint Received: 03/31/2006

Date Investigation Completed: 06/15/2006

Subject Area(s)

RESIDENT RIGHTS
RESIDENT BEHAVIOR/FACILITY PRACTICE
HOMELIKE ENVIRONMENT & CLEANLINESS
NUTRITION & FOOD SERVICES
MEDICATIONS
STAFF TRAINING AND PROFICIENCY
STAFF ADEQUACY
PROGRAM SERVICES

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

Date Complaint Received: 05/27/2005

Date Investigation Completed: 07/19/2005

Subject Area(s)

RESIDENT RIGHTS
RESIDENT BEHAVIOR/FACILITY PRACTICE

Result

SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

10009439

Date Complaint Received: 12/09/2003

Date Investigation Completed: 03/09/2004

Subject Area(s)

MEDICATIONS
PROGRAM SERVICES

Result

SUBSTANTIATED
SUBSTANTIATED

SOD #

10009256
10009256

Date Complaint Received: 10/03/2003

Date Investigation Completed: 01/13/2004

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE
MEDICATIONS

Result

SUBSTANTIATED
SUBSTANTIATED

SOD #

10009242
10009242

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